

**M05000006910**

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

**L. SELLERS**

NOV -1 2010

From:

Account Name : RMB ENTERPRISES  
Account Number : I20080000041  
Phone : (916) 497-0946  
Fax Number : (916) 498-0285

**EXAMINER**

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: Nyke.Pedra@Spi-global.com

**REGISTERED AGENT CHANGE  
SPI AMERICA LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

RECEIVED  
10 OCT 29 AM 6:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED  
10 OCT 29 AM 9:50  
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TALLAHASSEE, FLORIDA

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# STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: SPI America LLC

2. (a) Principal office address of limited liability company: SPI America LLC

☒ (Note: **MUST BE STREET ADDRESS**) 3500 S. Dupont Highway  
Dover, DE 19901

(b) Mailing address of limited liability company: SPI America LLC

☒ (Note: **MAY BE POST OFFICE BOX**) 2960 Professional Drive  
Springfield, IL 62703-5910

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3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: C T Corporation System

Registered Office Address: C T Corporation System  
1200 South Pine Island Road  
Plantation, Florida 33324

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Agent:** NRAI Services, Inc.

**NEW Registered Office Address:** NRAI Services, Inc.  
**(MUST BE FLORIDA STREET ADDRESS)** 2731 Executive Park Drive, Suite 4  
Weston, FL 33331

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]  
Signature of a member or authorized representative of a member

Nicanor Bedua  
Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature] Asst. Sec. NRAI Services, Inc.  
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
FILING FEE: \$25.00

INHS18 (05/08)

H100002370203

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